



Procedure for submitting

CERTIFICATE OF USE (CU) and LOCAL BUSINESS TAX LICENSE

All permit inspections for which a permit has been issued by the City's Building and Zoning Department shall be completed and final prior to an application for the Certificate of Use being issued. In the event any property/location trying to obtain a certificate of use has open permits, building violations or existing construction that no record exists in the City of Sweetwater or Miami Dade County, the applicant /business owner is responsible for assuring that before applying or obtaining a certificate of use the property/location come into compliance with all applicable codes.

STEP 1 Certificate of Use Application.

When it's required

Prior to opening any business in the City of Sweetwater, a Certificate of Use (also called a C.U. or zoning permit) must be obtained. A C.U. is required for the use of a home office, multifamily residential development (rental of lease), commercial and industrial development. A CU is required when a building is erected, altered or enlarged, or an existing building goes through a change of occupant, name, or type of business. A Certificate of Use allows for the occupancy of the structure as well as certifying that the use is permitted. All C.U.'s shall be renewed yearly on or before the first of October of each year. If the business moves, expand, change ownership, name, or business activity a new CU shall be applied for.

Why it is required.

The Certificate of Use assures that the business is allowed in the zoning district where it is located. It also verifies that the structure was built for the proposed type of business.

How to apply Download and fill out this form, scan, and email as a PDF attachment to

CUSUBMITTALS@CITYOFSWEETWATER.FL.GOV

What you need to send: The following information is required when applying:

- Completed application for the Certificate of Use signed by the listed property owner/corporate agents and notarized.
- Copy of the lease and/or sublease. Or relocation letter.
- If the certificate of use application is for a sublease, the lessee or sublessee needs letter of approval from landlord.
- Letter of approval from Association if applicable.
- Floor plan / location sketch.
- Nonrefundable upfront fee of \$150.00. Use authorization form (Page # 6)



Submittal Procedure

For every Certificate of Use there is a **NON-REFUNDABLE UPFRONT FEE of \$150.00**. This fee is to be paid at the time the application is submitted to the department. When the application is accepted the applicant will receive a process number. Once a process number for the CU application is given, the applicant will be required to pay a final amount. The next step after final payment, the applicant shall proceed to request the required inspections of the unit as outline in the inspection procedure below.

Upon receiving the process number for the CU, the applicant can then submit the Municipal Application for Certificate of Use/Occupational License to Miami-Dade County to receive DERM approval. Once the applicant receives the approval from Miami-Dade County, they can then proceed to submit to the LBTR application to the City of Sweetwater along with package via email to

LBTRSUBMITTALS@CITYOFSWEETWATER.FL.GOV. The LBTR will only be issued upon the CU application being approved and final (if applicable). The department will then provide the amount to be paid for the LBTR.

Inspection's procedure

The applicant/business owner shall request via email at inspections@cityofsweetwater.fl.gov the required inspections: Building, Plumbing, Mechanical, Electrical and Zoning. Additionally, the applicant/business shall call for fire inspection by Miami Dade County Fire Department, they can be reached at **786-331-5000**.

This process **MUST** be completed within 30 days from the date of submitting the application for Certificate of Use to the City.

After all inspections have been approved the applicant/business owner shall email

CUSUBMITTALS@CITYOFSWEETWATER.FL.GOV with the proof of Miami Dade County fire inspection approval to receive the issued Certificate of Use via email.



APPLICATION FOR CERTIFICATE OF USE

Date: _____

Process No. _____

BUSINESS INFORMATION

Name of Business: _____ FEI/EIN Number _____

D.B.A: _____

Address: _____ Folio No: _____

City: _____ State: _____ Zip Code: _____

Telephone _____ Email _____ Square Feet: _____

Type of Business (describe in detail) _____

Home Office _____ Medical Office _____ Admin Office _____ School _____ Retail _____ Restaurant _____ (Take Out) _____

Restaurant (Patron Area Sq. Ft. _____ Warehouse _____ Wholesale _____ Other _____

Previous business _____

Are you sharing space with another business Yes _____ No _____ if yes, please provide the business name _____

Name of the primary business _____ Type of business _____

CORPORATE INFORMATION

Corporate Officer/Owner _____ Title _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____ Email address _____

Signature of the applicant verifies the above information is true and correct. Signee understands the conditions under which the Certificate of Use is being approved and accepts that no charges or refunds can be made once issued. I am authorized to sign for the business and understand that any misrepresentation of the information on this application may result in the revocation of the CU and/or possible enforcement action being initiated against the business and/or is authorized representative. I further understand that a business must also apply for a Business Tax Receipt Occupational License).

X _____
Signature of Applicant

Print Name

STATE OF _____

COUNTY OF _____

Sworn to and subscribe before me this _____ day of _____ 20 _____.

Personally known or I.D. _____

By (Print Name) _____

Notary Signature _____

DEPARTMENTAL USE ONLY

Processor _____ Zoning _____ Resolution No. _____ Bldg. Permit# _____ Approved _____

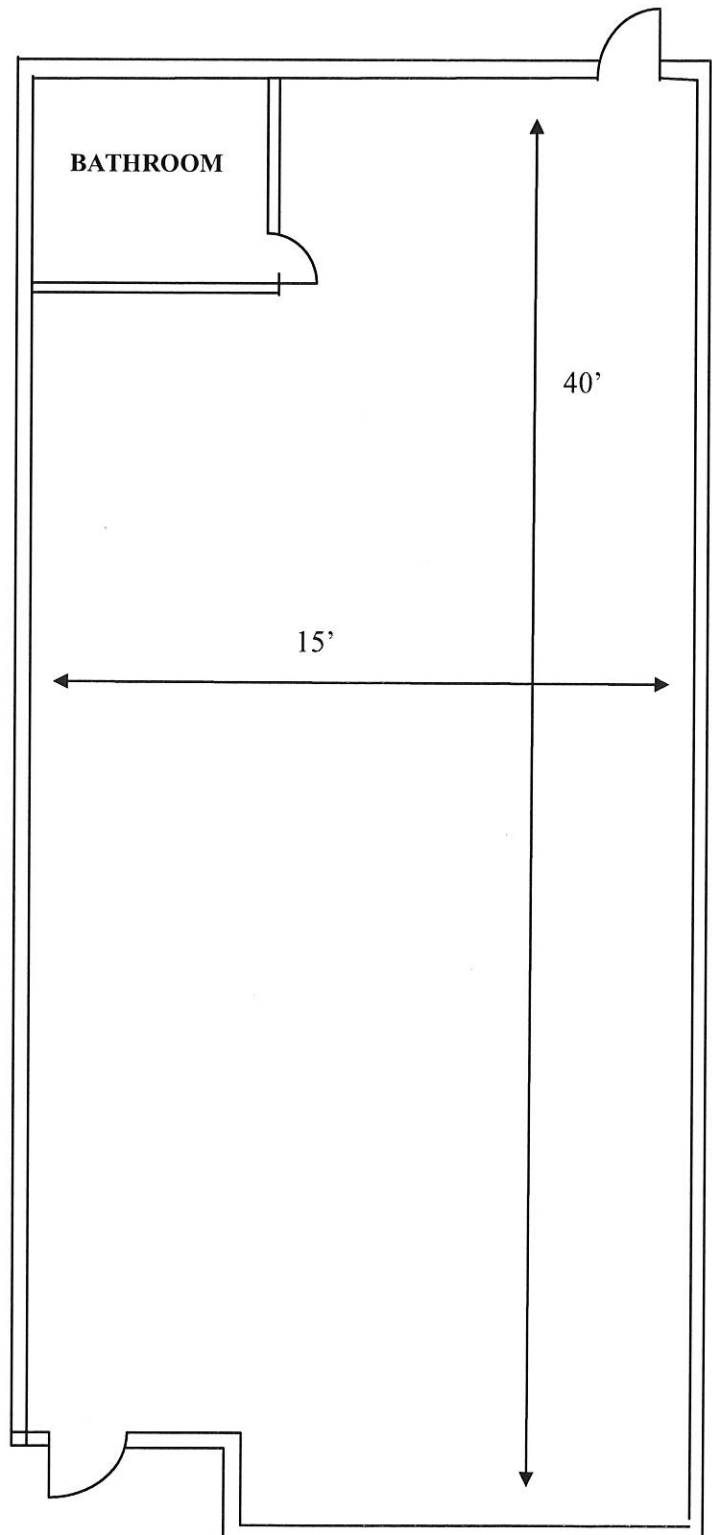
Denied _____ Conditions of approval _____

TYPICAL FLOOR PLAN

(EXAMPLE)

Minimum Requirement

1. Floor plan of unit
2. Show all existing walls
3. Show overall dimension
4. Provide address and unit number





City of Sweetwater

Address 1701 NW 112 AVE 102, SWEETWATER, FL 33172

Phone (305) 485-4526

One Time Credit Card Payment Authorization Form

Sign and complete this form to authorize City of Sweetwater to make a onetime debit to your credit card listed below.

By signing this form you give us permission to debit your account for the amount indicated on or after the indicated date. This is permission for a single transaction only, and does not provide authorization for any additional unrelated debits or credits to your account.

3 % surcharge will be applied to each transaction made.

Please complete the information below:

I _____ authorize City of Sweetwater to charge my credit card
(Full name)
account indicated below for _____ on or after _____. This payment
(Amount) (Date)
is for _____.
(Description of goods/service)

Billing Address _____

Phone # _____ Email _____

Cardholder Name: _____

Credit Card Number: _____

Expiration Date: _____ CVV2: _____

Account Type: Visa ____ Master Card ____ American express ____ Discovery ____

Signature _____

Date _____

I authorize the above named business to charge the credit card indicated in this authorization form according to the terms outlined above. This payment authorization is for the goods/services described above, for the amount indicated only, and is valid for one time use only. I certify that I am an authorized use for this credit card and that I will not dispute the payment with my credit card company; so long as the transaction corresponds to the terms indicated in this form.



Once you have obtained your Certificate of Use,

STEP 2 Fill out the Miami-Dade County Approval of Municipal Application for C.U. and follow these links:

<https://6ldgadmin.miamidade.gov/Upload/CU%20Portal%20Guide.pdf>

<https://www.miamidade.gov/Apps/REF/EPSPortal>

STEP 3 With MDC approval document, you must apply for a Local Business Tax Receipt.

A LBTR is required for any business such as home office, multifamily residential development (rental of lease), commercial and industrial development.

All LBTR's shall be renewed yearly on or before the first of October of each year. If the business moves, expand, change ownership, name, or business activity a new LBTR shall be applied for.

Why it is required.

The Local Business Tax Receipt assures that the business is licensed to operate in a designated location.

How to apply Download and fill out this form, scan, and email as a PDF attachment to:

LBTRSUBMITTALS@CITYOFSWEETWATER.FL.GOV

What you need to send:

The following information is required when applying:

- Miami Dade County DERM approval.
- Completed application for the Local Business Tax Receipt signed by the listed corporate agents
- Copy of the Articles of Corporation/ Fictitious name registration.
- Copy of the officer/ Owner's Driver License
- Copy of the State of Florida License if applicable.



BUSINESS TAX RECEIPT APPLICATION

NOTICE

This does not supersede any State or County Licenses that are required.

ANY LICENSE OBTAINED UNDER THE PROVISIONS OF THE CITY OF SWEETWATER LICENSE ORDINANCE UPON A MISREPRESENTATION OF A MATERIAL FACT SHALL BE DEEMED NULL AND VOID AND THE LICENSEE WHO HAS THEREAFTER ENGAGED IN ANY BUSINESS UNDER SUCH LICENSE SHALL BE SUBJECT TO PROSECUTION FOR DOING BUSINESS WITHOUT A LICENSE, TO THE SAME EFFECT AND DEGREE AS THOUGH SUCH LICENSE HAD EVER BEEN ISSUED.

Name of Applicant (Owner/Officer)		Home Phone Number	
Sweetwater Business Address	City	State	Zip Code
Name of Corporation and/or Name of Business		Federal Employer I.D.	
Business Mailing Address		Business Phone Number	
E-Mail			

Signature of Applicant	Date
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If Corporation, give name of officers:

President name _____ Vice-President name _____
Secretary name _____ Treasurer name _____

TYPE OF BUSINESS: _____
Business start date: _____

Description of location

- | | | |
|--|---|---------------------------------------|
| <input type="radio"/> Apartment Bldgs. _____ | <input type="radio"/> Retail _____ | <input type="radio"/> Wholesale _____ |
| <input type="radio"/> Medical Office _____ | <input type="radio"/> Restaurant _____ | <input type="radio"/> Other _____ |
| <input type="radio"/> Admin Office _____ | <input type="radio"/> Warehouse _____ SQ FT | |

- | | |
|--|--|
| <input type="radio"/> Value of Stock (Inventory) _____ | <input type="radio"/> Eating Establishment chair _____ |
| <input type="radio"/> Number of Employees _____ | <input type="radio"/> Number of Vending /ATM _____ |
| <input type="radio"/> Number of Vehicles _____ | <input type="radio"/> Number of Units/Hotel Unit _____ |
| <input type="radio"/> Home Office/Peddler _____ | |

STATE OF FLORIDA LICENSE (IF REQUIRED) _____

Restrictions:

HAVE QUESTIONS OR NEED SUPPORT OBTAINING THE DERM APPROVAL, CONTACT MIAMI DADE COUNTY DIRECTLY

- ❖ If you have questions about the *Unincorporated Certificate Of Use Review Process* or for further assistance, email RER-CUINFO@miamidade.gov or call (786) 315-2660.
- ❖ If you have questions about the *Municipal Review Process* or encounter problems using this new feature, send an email to: dermplanner@miamidade.gov.
- ❖ For additional information regarding WASD requirements, please email the WASD New Business Supervisors List at: NewBusinessSupvList@miamidade.gov.

MUNICIPAL CERTIFICATE OF USE APPROVAL

MIAMI-DADE COUNTY APPROVAL OF MUNICIPAL APPLICATION FOR CERTIFICATE OF USE OR BUSINESS LICENSE	
FOLIO: [REDACTED]	CERT NO: [REDACTED]
ZONING DISTRICT: I	DATE OF ISSUANCE: August 17, 2022
MUNICIPAL APPLICATION NO:	PROCESS NO: [REDACTED]
THIS APPROVAL MUST BE POSTED ON PREMISES	
CORP NAME / DBA: [REDACTED]	
BUSINESS ADDRESS: [REDACTED]	
BUSINESS USE: OFFICE USE ONLY	
USE SPECIFICS: FOR CONSTRUCTION CO.	
LEGAL DESCRIPTION: GARSH COMMERCE PARK DB 168-009 T-22875 TR A LOT SIZE 116750 SQ FT FAU [REDACTED] FKA [REDACTED]	
-----CONDITIONS-----	
(DECU)	NO HAZARDOUS MATERIALS
(DECU)	OFFICE USE ONLY
(RER)	THIS MIAMI-DADE APPROVAL OF A MUNICIPAL CERTIFICATE OF USE IS VALID FOR AN UNLIMITED TIME OR AS INDICATED BELOW PROVIDED THERE ARE NO CHANGES TO THE USE, BUSINESS NAME OR OWNERSHIP; OR EXPANSIONS, ALTERATIONS OR ADDITIONS TO THE APPROVED USE. ALL CHANGES LISTED ABOVE WILL REQUIRE ISSUANCE OF A NEW CERTIFICATE OF USE.
(RER)	THIS MIAMI-DADE APPROVAL OF A MUNICIPAL CERTIFICATE OF USE DOES NOT RELIEVE THE APPLICANT FROM COMPLIANCE WITH ANY FEDERAL, STATE, OR LOCAL REGULATIONS.
(RER)	YOU ARE ALSO REQUIRED TO ALLOW MIAMI-DADE COUNTY INSPECTORS ACCESS AT ANY REASONABLE TIME TO CONDUCT AN INSPECTION.

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